Reviewer’s report

Title: The MEDEA FAR-EAST study  Conceptual framework, methods and first findings of a multicenter cross-sectional observational study

Version: 1 Date: 04 Feb 2019

Reviewer: Yves Chaput

Reviewer’s report:

Thank you for again giving me the opportunity to review this revised manuscript. In general, the authors have done a nice job answering the many queries that I submitted to them in my first revision.

MAJOR POINTS

The GENERAL major point about tables in the BACKGROUND AND METHODS section I leave up to the authors and the associate Editor.

BACKGROUND SECTION

The Background section is now much clearer in this revised manuscript. I have no further major points.

METHODS SECTION

The Methods section was extensively re written and is now quite complete. I have no further major points for this section.

RESULTS

Again, this section is relatively sparse compared to the other sections and but a modest amount of data are presented. Again, I realize that these are "preliminary" data and more of an elaboration on the methodology itself.

DISCUSSION

The authors have done a nice job re arranging and streamlining the discussion section.
I do have one last major comment to make to the authors. It concerns how the authors are interpreting the results of some of their rating scales, especially the GAD-7. They state that a % of their cohort suffers from "generalized anxiety" (line 331). In my opinion the authors simply do not have the data necessary to support such a statement. They are more nuanced with regards affective disorders, where they use the more generic "depression" term, without specifying the underlying cause (major depression, dysthymia, adjustment disorders, bipolar depression ….). The authors should use a more generic term for the results of the anxiety scale, such as "anxiety" or "anxiety symptoms" as they do in the subsequent paragraphs.

MINOR POINTS:

Style and grammar; 

BACKGROUND SECTION

Line 44 "…in China in 2011 (2)"

Line 48 "A recent worldwide review on prehospital delay…..range between 1.6 hours and 12.9 hours (6)."

Line 66. "inner psychologically driven barriers" is a odd term. Why not just use "psychological barriers"?

Line 70. "…symptoms which do not match one's expectations of an AMI (25)…attributed to those other than the heart, act as barriers…"

Line 81. Effectivity?

DISCUSSION SECTION.

Not quite certain what the meaning of the phrase on lines 315 to 319 means. It begins with "Nevertheless, our descriptive…" I would rewrite it to make it clearer.

Line 325 "It accurately screens for …" This is a subjective term. I would probably go with "It not only screens for typical and…"

Line 347, "In previous studies in China the prevalence of patients attributing…"

Line 350 "As a response to these symptoms …."  

Line 354 "… the consistency of our results with those of prior Chinese studies..

Are the methods appropriate and well described?
If not, please specify what is required in your comments to the authors.

Yes

**Does the work include the necessary controls?**
If not, please specify which controls are required in your comments to the authors.

Yes

**Are the conclusions drawn adequately supported by the data shown?**
If not, please explain in your comments to the authors.

Yes

**Are you able to assess any statistics in the manuscript or would you recommend an additional statistical review?**
If an additional statistical review is recommended, please specify what aspects require further assessment in your comments to the editors.

I am able to assess the statistics

**Quality of written English**
Please indicate the quality of language in the manuscript:

Acceptable

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